Subasit 3 Copies to Appropriate District Office	State of New Mexico Ener, Minerals and Natural Resources Department OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088D		G <sup>51</sup> Form C-143 DP Rovind 1-1-89	
DISTRICT I P.O. Box 1980, Hobbe, NM 88240 DISTRICT II			WELL API NO.	
P.O. Drawer DD, Artania, NM 88210 DISTRICT III			5. Indicate Type of Lesse STATE STATE FEE	
1000 Rio Brazos Rd., Aziec, NM \$7410		FEB 27 '89	6. State Oil & Ges Losse No. 2029	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name	
1. Type of Well: OL   OL QAS   WELL WELL   2. Name of Operator	one Wate	er Injection	South Red Lake Grayburg Unit	
S & J Operating C 3. Address of Operator	ompany /		33 9. Pool same or Wildow	
P. O. Box 2249, Wichita Falls, TX 76307		Red Lake QN-GB-SA		
Unit Lotter <u>C</u> : <u>280</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line				
Section 2	Township 18S Ra	nge <u>27E</u> DF, RKB, RT, GR, etc.)	NMPM Eddy County	
II.     Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data       NOTICE OF INTENTION TO:     SUBSEQUENT REPORT OF:				
		REMEDIAL WORK		
	CHANGE PLANS	COMMENCE DRILLING		
PULL OR ALTER CASING		CASING TEST AND CE		
OTHER:	□	OTHER: Tempor	carily Abandon X	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

This well was T. A.'d when we took over operations on 10/1/87. We do not know how long it had been shut-in prior to this date. A consulting engineering firm is currently studying this waterflood unit to determine if any changes need to be made in the flood pattern.

I benety certify that the information above is true and complete to the best of my knowl sconarues Mandy Robertson	•	DATE 2/22/89
TYPE OR PROT NAME		TELEPHONE NO.
(This space for State Unit) APTROVED BY Johnny Columnon CONDITIONS OF APPROVAL, IF ANTH Unit, 1 fumther not	TTLE OIL AND GAS INSPECTON	DATE <u>F19 2 8 809</u>